



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

May 24, 2005

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of RB's Liquor Store/ Russ's Market, 1709 Washington Street requesting that Geoffrey Lemon be approved as the manager of the class d liquor license.

Background information on the applicant is as follows:

Geoffrey Lemon was born in Urbana, Illinois. He obtained his GED in 1976.

Mr. Lemon has been employed at Russ's Market since 1973.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) RiB Liquor / Rucis market

☒ Manager Owner Other ☐

Name: Geoffrey Lemon

US Citizen ? ☒ Yes No

Has applicant ever been cited for liquor law violations ? ☒ No Yes
Explain _____

Does applicant have an interest in another liquor license ? ☒ No Yes
Explain _____

Is spouse qualified to hold a license ? Yes No ☒ N/A

How is applicant if not an owner to be paid ? ☒ Salary Hourly

How many hours will applicant be at the establishment ? 50

Any other employment ? ☒ No Yes, explain _____

Any previous experience with a liquor license ? ☒ Yes No

Any criminal convictions ? ☒ No Yes

Comments _____

Is applicant a property owner in Lincoln ? ☒ Yes No

Is applicant involved in any civil litigation ? ☒ No Yes

Comments _____

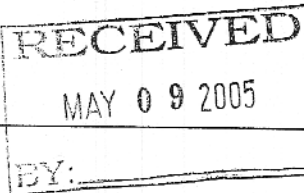
☒ Photo ☒ Records Check ☒ References

Comments _____

Interview Date 5/24/05



Dave Heineman
Governor



PH: 6-13-05
STATE OF NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)
web address: <http://www.nol.org/home/NLCC/>

A5-048329
97

May 6, 2005

City Clerk of Lincoln
City/County Building
555 S 10 Street
Lincoln, NE 68508

RE: Manager Application Submittal

Dear Sir/Madam:

The corporation B & R Stores, Inc has submitted the enclosed Application for Corporate Manager. The establishment has the following liquor license(s) Class D #02481. The applicant's name is Geoffrey W Lemon.

Please present this application to your City/County Council and return the results of the action taken to our office. If you have any questions or comments, please give me a call at (402) 471-4881.

Sincerely,

Jackie B. Matulka
Licensing Division

Enclosure

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: <http://www.nol.org/home/NLCC/>

RECEIVED
MAY - 4 2005
NEBRASKA LIQUOR
CONTROL COMMISSION

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION

BAR Stores, Inc

CLASS & LICENSE NUMBER

D 02481

TRADE NAME OF LICENSED PREMISE

~~Buss's Market #1~~ RB's liquor store

STREET ADDRESS OF LICENSED PREMISE

1709 Washington

CITY

Lincoln

COUNTY

~~NE~~ Lancaster

ZIP CODE

68502

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:

[Signature]

APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN)

Lemon, Geoffrey W

SEX

F ☒ M

SOCIAL SECURITY NUMBER

DATE OF BIRTH

PLACE OF BIRTH

Urbana IL

HOME STREET ADDRESS

4410 Serre PL

CITY

Lincoln

COUNTY

Lancaster

STATE

NE

ZIP CODE

68516

HOME TELEPHONE NUMBER

(402) 471-2823

BUSINESS TELEPHONE NUMBER

(402) 477-1238

DRIVERS LICENSE NUMBER & STATE

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE NONE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)

Lemon, Elizabeth, Ann, Sutton

SOCIAL SECURITY NUMBER

DRIVERS LICENSE NUMBER
& STATE

NE

DATE OF BIRTH:

PLACE OF BIRTH: Lincoln, NE

1. READ CAREFULLY - Answer completely and accurately.

Has anyone who is a party to this application or their spouse, ever been convicted of or plead guilty to any criminal charge? Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☒ YES ☐ NO

1-3 Traffic Violations, dates uncertain, None were alcohol related
all in Lancaster County

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

☐ YES ☒ NO

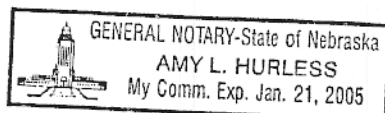
NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Elizabeth A. Lemon
Signature of Spouse

RECEIVED
MAY - 4 2005
NEBRASKA LIQUOR CONTROL COMMISSION

SUBSCRIBED in my presence and sworn to before me this 10th day of September, A.D., 2004



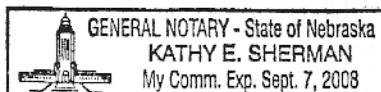
Amy L. Hurless
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Geoffrey W. Lemon
Signature of Licensee/Applicant

Geoffrey W. Lemon
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 20th day of September, A.D., 2004



Kathy E. Sherman
Signature of Notary Public

FORM 35-4178
REV 2/01